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An
Essay
on
Dysentery
by
John Emerson
of
Pensylvania

W. E. H
Dean

Sept 20th 1894

W. S. H.

Dear

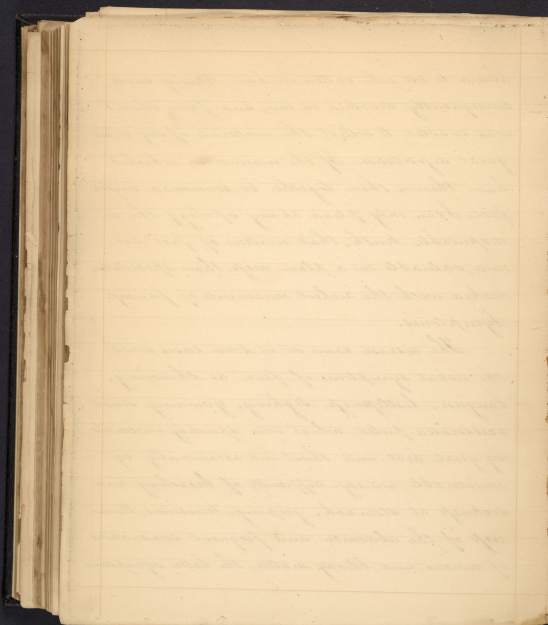
Remarks on the epidemic Dysentery, which prevailed in some of the western parts of Pennsylvania, during the fall of 1819, & 1820.

The disease which has been selected, as the subject of the following Thesis, was in general, so formidable in its attacks, and so various in its symptoms, that I enter with diffidence on its history and treatment. Nor is my diffidence diminished by the consideration that I was an eye witness to its ravages, for this very circumstance causes me still more sensibly to feel my incapacity to do it justice. May I not however claim indulgence on the ground, that my observations are the result of personal experience? Such is the fact during the prevalence of the disease, the number of those attacked with it was so great, that the Physician with whom I was pursuing my studies could not possibly

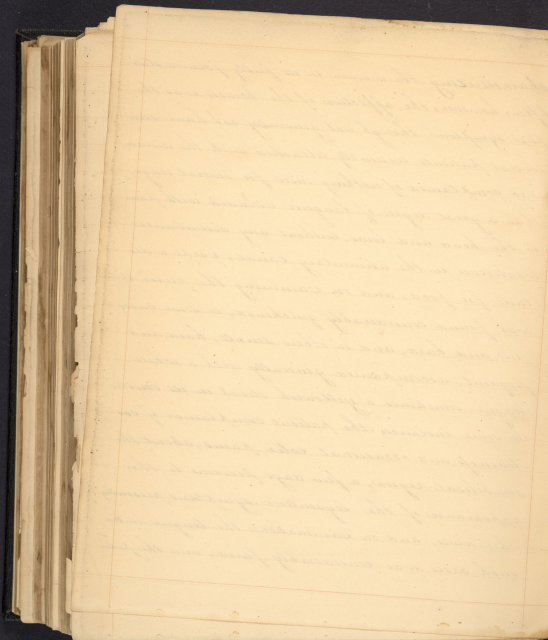
allude to all who called on him. Many cases
consequently devolved on me, and from these I
was enabled to collect the materials of my in-
augural dissertation. If the manner in which I
have thrown them together be considered imper-
fect, I can only plead as my apology the in-
disputable truth, that matters of fact are
more valuable in a plain dress, than speculation
decked with the richest ornaments of fancy.

Symptoms.

The disease came on in some cases with
the usual symptoms of fever as shivering,
languor, listlessness, sighing, yawning, small
accelerated pulse, which were speedily succeeded
by great heat and thirst and occasionally by
considerable anxiety, difficulty of breathing and
sickness at stomach, griping, tenderness, tender-
ness of the abdomen and frequent evacuations
of mucus and bloody matter, the latter symptoms



characterizing the disease in its fully formed state.
 Often, however, the affection of the bowels was the
 first symptom, though not generally, as I have seen
 several patients evidently attacked with the disease,
 who complained of nothing more for several days,
 than a great degree of languor, attended with pains
 in the head and loins, without any disturbance
 whatever in the alimentary canal, except a dis-
 taste for food, and on examining the pulse it
 was found considerably quickened, in some cases
 full and hard, and in others small, hard, and
 frequent, accompanied generally with a white
 tongue, sometimes a yellowish streak in its centre.
 In some instances the patient complained of cos-
 tiveness, and occasional colic pains, about the
 umbilical region, a few days previous to the
 appearance of the dysenteric symptoms presenting
 themselves, and on examination, the tongue in all
 such cases was considerably furred, and the pulse



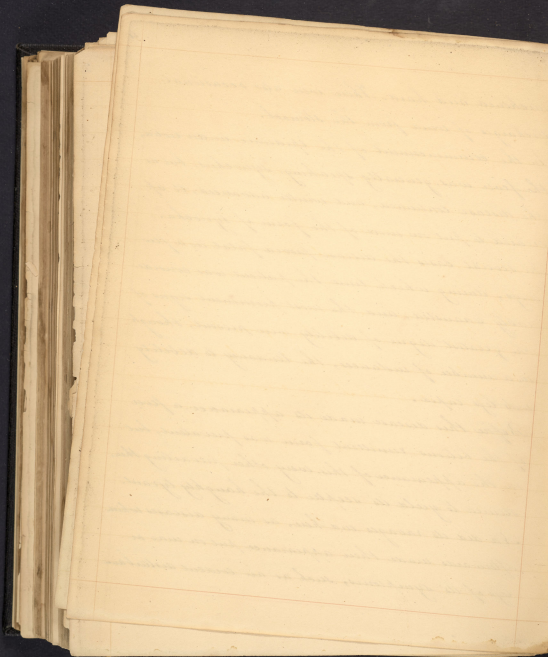
quickened and hard. There were also occasional discharges of wind from the stomach.

In the commencement of the epidemic under notice, the fever was, generally speaking, synochus, but as the disease continued, and winter advanced, it appeared to put on more of the form of typhochia.

In several cases the disease proved fatal in a few days, during which time the patient was considerably exhausted, and the most prominent signs of the greatest degree of debility were present, though in a number of instances, the tendency to debility was less rapid.

Before this disease made its appearance, a fever of the bilious remittent form was prevalent, but on the appearance of this, every other prevailing then, seemed to yield its sceptre to the haughty tyrant.

Næ die its ravages were here, as many diseases which afterwards made their appearance put on more or less of its symptoms, such as an evident disturbance



in the alimentary canal, occasioning Cholera Morbus, Bilious Colic, and Cholera Infantum.

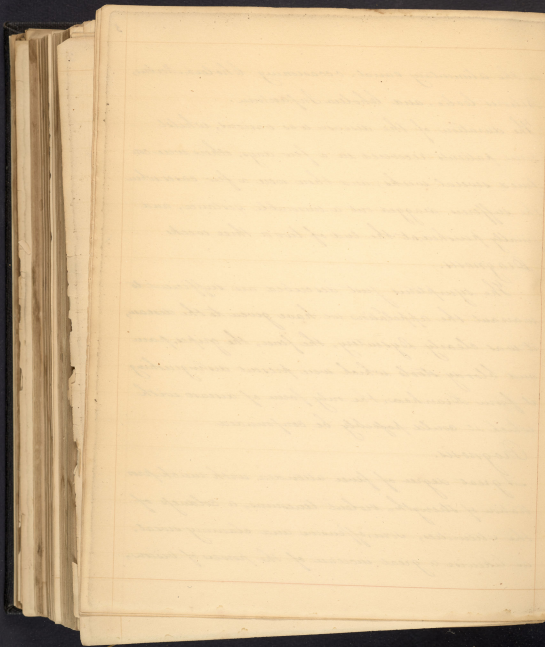
The duration of the disease was various, whilst some patients recovered in a few days, others were confined several weeks; and there were a few cases when the sufferers dragged out a miserable existence, and finally perished, at the end of two or three weeks.

Diagnosis.

The symptoms just described are sufficient to warrant the appellation we have given to the disease, it was clearly Dysentery, the fever, the gripes, pain and bloody stools which were present distinguishing it from Diarrhea, the only form of disease with which it could possibly be confounded.

Prognosis.

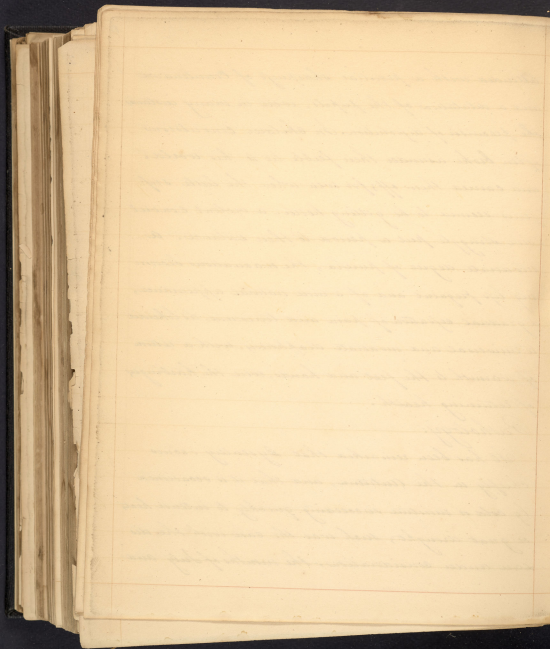
A great degree of fever attended with much prostration of strength, violent tenesmus, a collapse of the extremities, vom, offensive and clammy sweat, as likewise a great increase of the powers of vision,



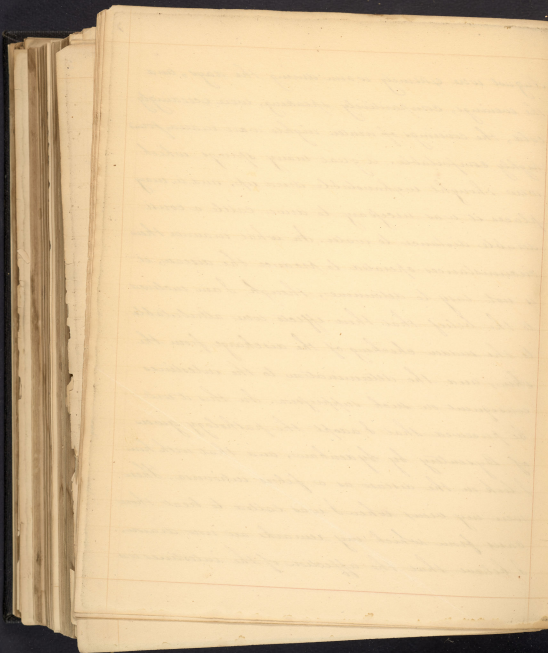
attended with a peculiar sharpness of countenance and a dilatation of the pupils, were in many instances the precursor of dissolution. In children convulsions often broke asunder their feeble tie to this world, and carried them off; for even when the little sufferers seemed to be getting better, a violent convulsive struggle put a period to their existence. As moderate degree of purgation, the evacuations becoming less frequent and of a more natural appearance, a gradual cessation of pain and tenderness, as likewise a universal and moderate diarrhoea, with a return of warmth to the feet and hands, were the harbingers of returning health.

Pathology.

It has been remarked that Dysentery occurs chiefly in the Autumn, and that it is occasioned by cold or moisture succeeding quickly to intense heat, or great drought, such was the case with the disease under consideration, the months of July and



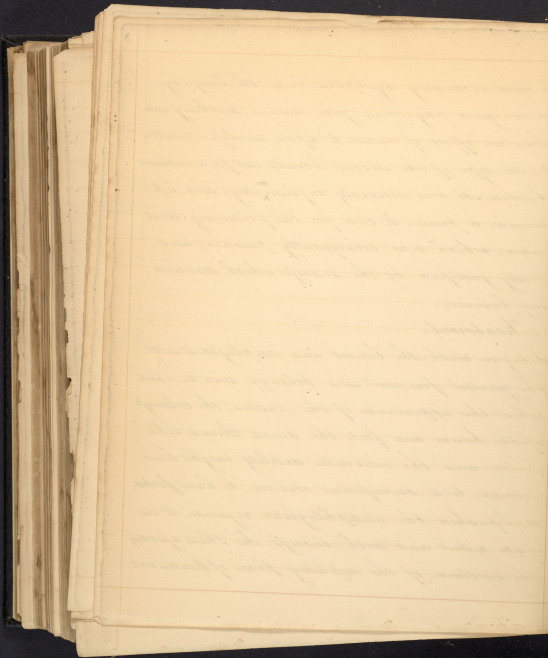
August were generally warm during the days, and
 the evenings, comparatively speaking, were exceedingly
 cold, the coverings of winter nights were in fact found
 highly comfortable. A great many springs which
 were thought inexhaustible dried up, and in many
 places it was necessary to drive cattle a consi-
 derable distance to water. In what manner these
 circumstances operated to produce the disease, it
 is not easy to determine, though I am inclined
 to the belief that their effects were attributable
 to the sudden checking of the discharge from the
 skin, and the determination to the intestines
 consequent on such suppression. In this it will
 be perceived that I adopt the pathology given
 of Dysentery by Sydenham, and that with him
 I look on the disease as a febris introversa. These
 were my views when I was called to treat those
 cases from which my remarks are now drawn.
 I believe that the affection of the intestines was



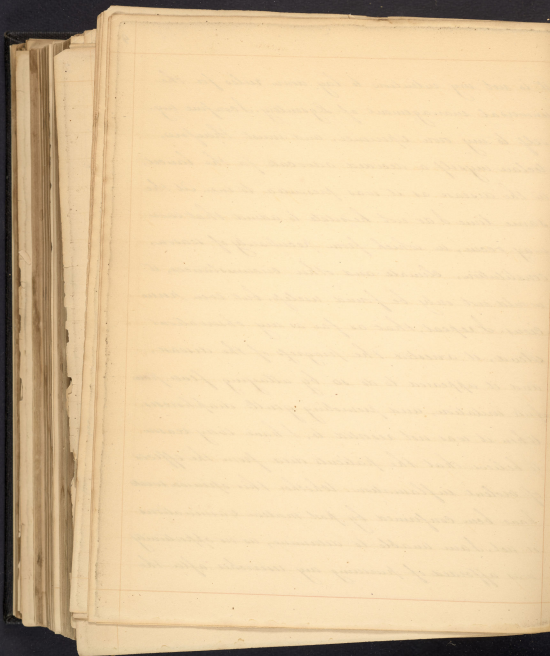
a more secondary symptom, or in the language of the great physician just named, nothing more than an effort of nature to expel malaric matter. On the type of the disease I could not for a moment hesitate. It was decidedly inflammatory, and appeared, a priori, to call for the following treatment, which was consequently pursued, and fully justified by the success which crowned my labours.

Treatment.

I began with the lancet and employed it with the greatest freedom and boldness, even in cases where the appearance of the patient, the colourings of the hands and feet, the small thread like pulse, and the muscular debility might have seemed, to a superficial observer, to have forbid it. I pushed the antiphlogistic regimen to its full extent and with success. In thus asserting the excellence of the depleting plan of treatment,



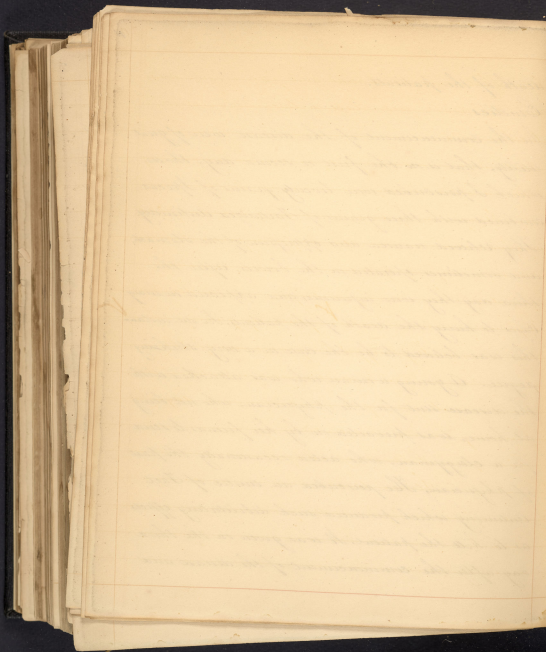
it is not my intention to lay down rules for the universal management of Dysentery. I confine myself to my own experience, and must therefore, declare myself a decided advocate for the lancet, in the disease as it was presented to me. At the same time I do not hesitate to admit that cases may occur, in which from peculiarity of season, constitution, climate and other circumstances, it would not only be found useful, but even pernicious. I repeat, that as far as my observations extend, it arrested the progress of the disease, and it appeared to do so by allaying febrile, putrid irritation, and promoting gentle diaphoresis. When it was not resorted to, I have every reason to believe that the patients died from the effects of violent inflammation. Whether this opinion would have been confirmed by post mortem examinations or not, I am unable to determine, as no opportunity was afforded of pursuing my researches after the



death of the patients.

Emetics.

In the commencement of the disease was of great utility, that is, on the first or second day, those which I prescribed were twenty grains of Ipecac combined with three grains of Tartarized Antimony. They relieved nausea and oppression of the stomach, and sometimes operated on the bowels, after the third day they were injurious, and appeared in many cases to hurry the death of the patients. In one instance this was believed to be the case in a very striking degree. A young woman who was attacked with the disease sent for the physician, who not being at home, was prevailed on by her friends to send for a clergyman, who acted occasionally the part of physician. He prescribed an emetic of Tart. Antimony which produced such debilitating effects as to kill the patient. It was given on the third day after the commencement of the disease and

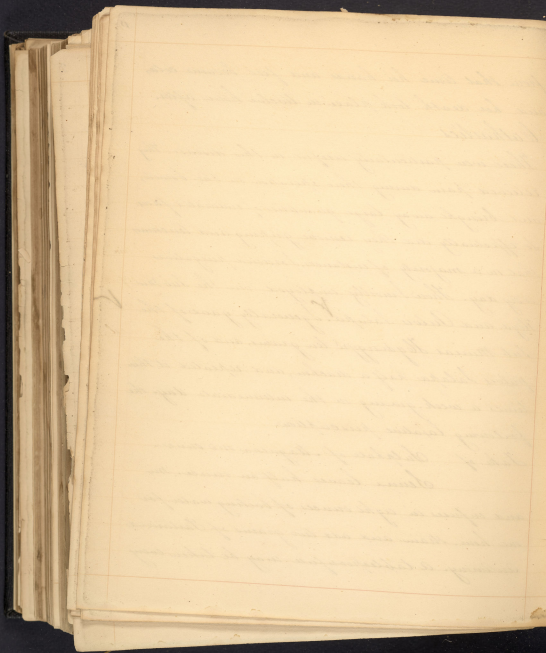


from that time her hands and feet became cold,
and her death took place in twelve hours after
Cathartics.

These were particularly useful in this disease. They
relieved pain during their operation on the bowels,
and brought away large quantities of indurated feces.
So effectually did they remove griping and tenesmus
that in a majority of instances, I ordered purgatives
every day. Those most commonly employed were the Sub-Muri-
Kaya, and Pulvis Salapa. I generally gave of the
Sub-Murias Hydragyre ten grains, and of the
pulvis Salapa half a drachm, and repeated it three
times a week, giving on the intermediate days the
following laxative prescriptions.

Take of Sulphate of Magnesia one ounce.

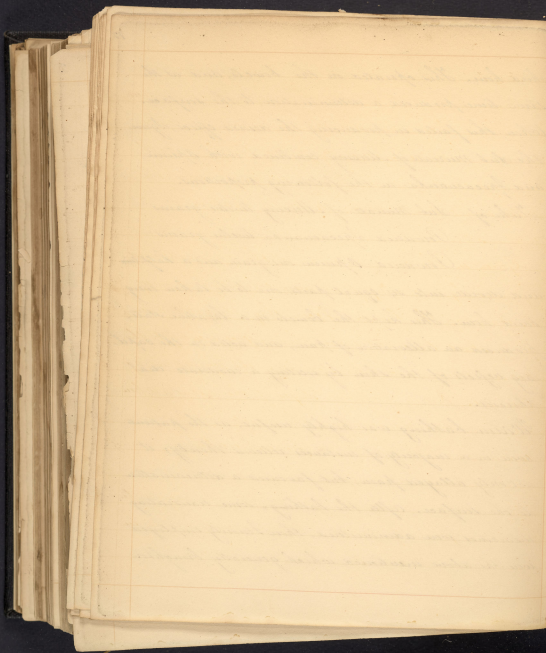
Scum leaves half an ounce. Mix
and infuse in eight ounces of boiling water for
one hour, strain and add two grains of Tartarised
Antimony. A tablespoonful may be taken every



third hour. This operated on the bowels, and at the same time produced a determination to the surface. When this failed in producing the desired effect, I gave the Sub Murate of Mercury combined with Opium and Ipecacuanha in the following proportions.

Take of Sub Murate of Mercury twelve grains
 Powdered Ipecacuanha twelve grains
 Powdered Opium one grain and a half, ^{two}
 and divide into 24 equal parts, one to be taken every third hour. This kept the bowels in a laxative state, produced an alleviation of pain, and acted on the capillary vessels of the skin by exciting a moderate diaphoresis.

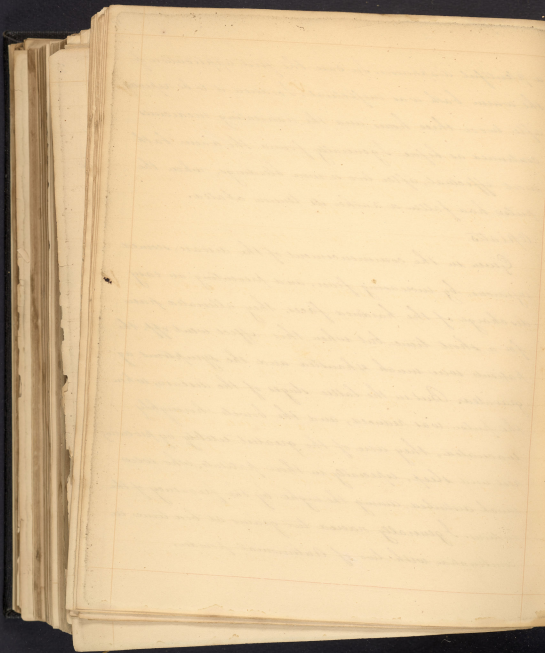
Warm bathing was highly useful, as the patients were in a majority of instances relieved thereby; it not only allayed pain, but favoured a determination to the surface, after the bathing, some nauseating medicines were administered, those I mostly employed were the above mentioned which generally brought on



a plentiful diaphoresis. In case the first application of the warm bath was ineffectual, I ordered it to be repeated after two or three hours and the nauseating medicines continued as before. I generally found the warm bath most effectual, after two or more bleedings, when the pulse had fallen or rather its tension abated.

Opiates

Given in the commencement of the disease, seemed injurious, by increasing fever, and preventing an easy discharge of the hardened feces, they alleviated pain for a short time, but when this effect went off, the patients were much exhausted and the symptoms aggravated. But in the latter stages of the disease, when the pulse was reduced, and the bowels thoroughly evacuated, they were of the greatest utility by procuring rest and sleep, especially in those patients, who were much disturbed, during the night by the frequency of the motions. I generally ordered two grains at bed time in combination with two of Antimonial powder.

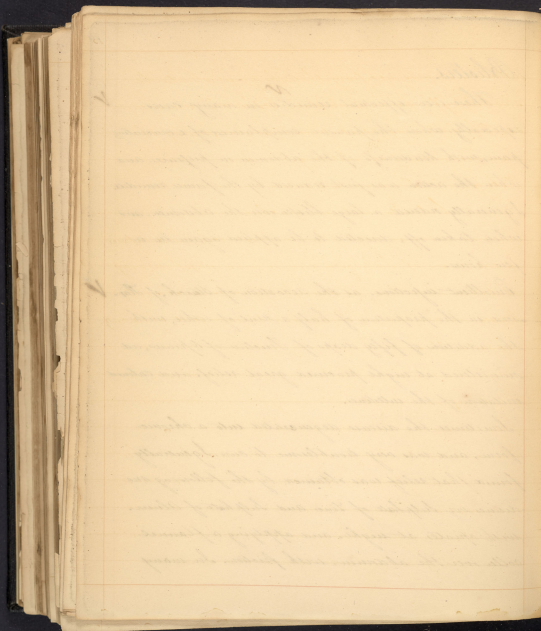


Blisters.

These were effectual remedies in many cases, especially, when the patient complained of excruciating pain, with tenderness of the abdomen on pressure, and when the action was just reduced by the former remedies. I generally advised a large blister over the abdomen, and when taken off, directed to be applied again in a few hours.

Emollient injections, as the decoction of Marsh, of Flax-seed, in the proportion of half a pint of water, with the addition of fifty drops of Tincture of Opium, administered at night procured great relief, and calmed irritation of the intestines.

Sometimes the disease degenerated into a chronic form, and was very troublesome to cure. I generally found that relief was obtained by the following medicines viz. Sulphate of Zinc and Sulphate of Alumina, with opiates at night, and applying a flannel roller over the abdomen, with friction. In many

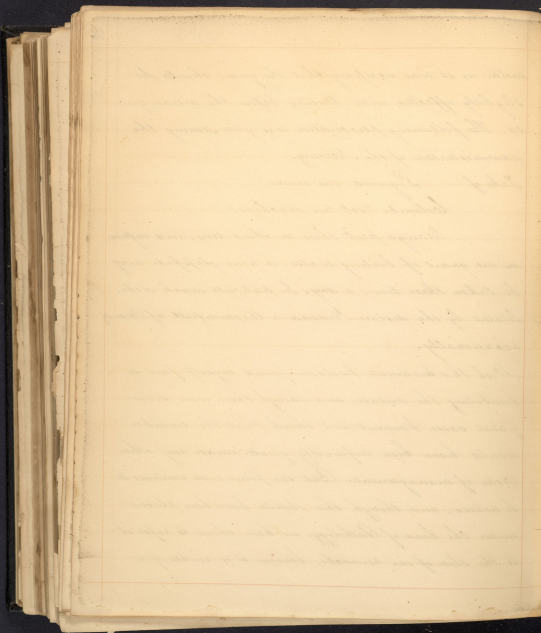


instances it was necessary that the gums should be slightly affected with Mercury before the disease given. The following prescription was given, during the administration of the Mercury.

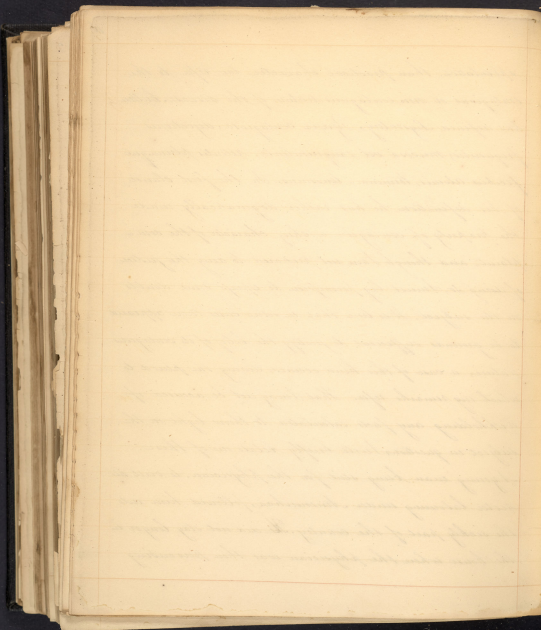
Take of Logwood one ounce
Columbo root two machins

Orange peel three machins. mix, and infuse in one quart of boiling water. a wine glassful may be taken three times a day. In patients much debilitated by the disease I ordered a teaspoonfull of Brandy occasionally.

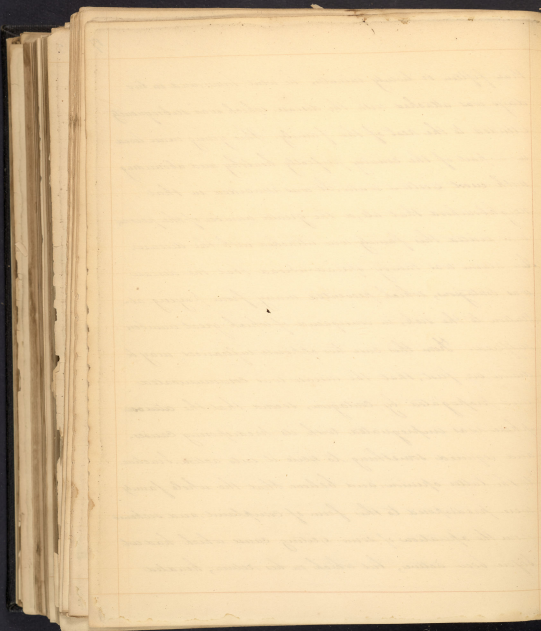
With this treatment I seldom found myself fail in combating the disease, and though there were some fatal cases, I cannot but think that the number would have been infinitely greater, under any other mode of management. But one point more remains to be noticed, and though this should have been placed under the head of Pathology, we have chosen to refer it to the end of our remarks, because it is rather of a



speculative, than practical character. we refer to the contagious or non contagious nature of the disease. Cullen has defined Dysentery, *Pyrexia contagiosa, defecationis frequentis, mucosa vel sanguinolenta, repletis plerumque fecibus alvina, tormina, tenesmus*. In the first clause of his definition he has rather dogmatically made the property of contagion a chief character of the complaint, and though I am not prepared to deny the justice of doing so, I must by permission express some doubts on the subject. It is true that in some cases there appeared to be grounds sufficient to justify the belief of its contagious nature, a case of this kind occurred during the period to which my remarks refer. That I may not be accused of withholding any facts calculated to throw light on the subject in question I will briefly relate one of these. A young man being sent for the physician, to visit his sister labouring under Amenorrhoea, followed him into the sickly part of the country. He did not stay longer in the house where the physician was then practising



than fifteen or twenty minutes, he went home, and in two days was attacked with the disease which was subsequently extended to the rest of the family. This young man lived in a part of the country perfectly healthy and abounding with most excellent water. It was remarked in that neighbourhood that all, or the greater number of the persons who visited this family were attacked with the disease. An alarm was thereby spread abroad that the disease was contagious, which prevented many from paying attention to the sick, in consequence of which great numbers suffered. From this case two opposite inferences may be drawn, viz. first, that the disease was communicated and propagated by contagion, second that the atmosphere was impregnated with its predisposing causes, and required something to excite it into action. I incline to the latter opinion, and believe that the whole family were predisposed to this form of complaint, and sickened from the operation of some exciting cause which had not before been active, but which on his return, kindled



the latent spark into a flame. Whether this opinion be correct, is not however a matter of much moment, the business of our profession is to discriminate closely between the varying symptoms of disease, to act promptly and energetically, and to relate faithfully the facts as they are ^{presented} to us. This I have endeavoured to do, and if I have failed in my attempt, I shall still retain the satisfaction arising from the consciousness of having, at least, made an effort to perform my duty.

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